

P.O. BOX



Update on the Happenings of CMS's Managed Care Systems and Support Operations

Division of Enrollment and Payment Operations, HPBG, CBC – Centers for Medicare & Medicaid Services

INSIDE THIS ISSUE

EXCLUSIVE DRUG CARD SPONSOR ENROLLMENT PROCESS.....

MMCS ACCESS

MMCS DELAYED

NDM VS CONNECT: DIRECT

ALERT – ALERT- ALERT

REMINDER – REVISED WORKING AGED PROCESS

MEDICARE MANAGED CARE SYSTEM (MMCS) USER TRAINING.....

EXCLUSIVE DRUG CARD SPONSOR ENROLLMENT PROCESS

Managed care organizations (MCOs) that elected to offer the Medicare Discount Drug Card benefit to their members must submit transactions to CMS's Drug Card Enrollment and Eligibility Verification System (EEVS). The EEVS

maintains drug card sponsor enrollment and transitional assistance (TA) information.

MCOs can contract with Systems Management Specialists (SMS) to submit enrollments for TA and nonTA members to EEVS. MCOs can also elect to utilize the Group Health Plan (GHP) system to enroll members. While the GHP cannot receive information related to TA members, it can submit enrollment transactions to EEVS on behalf of MCOs for non TA members.

During the first month's payment process, current members of MCOs that CMS can identify as electing the drug card benefit, will be automatically enrolled by GHP in EEVS. If CMS cannot identify them, MCOs may submit a new transaction type 02 (similar to the Correction transaction 01) along with their monthly transmission file. The GHP will reformat these transactions and send them to EEVS.

In subsequent months' pay process, MCOs may continue to utilize the 02 transaction to enroll new members. There

will be a new monthly report in GROUCH that will contain the transactions that were rejected by EEVS along with the associated reason code.

Specific information is contained in the letter released in late March 2004 entitled "Medicare Discount Drug Card Enrollment Process for Managed Care Organizations that are Exclusive Drug Card Sponsors". The letter is also available on our website at: <http://www.cms.hhs.gov/healthplans/systems/systeminfo.asp>

MMCS ACCESS

Currently, there is no need to request access to the Medicare Managed Care System (MMCS) database since it is **not yet on-line.**

Anticipated "Go-Live" date for the new MMCS database is October 2004. The current plan is to roll-over all current MCCOY users into the MMCS database without the need of the CMS Access forms. CMS access forms will become necessary for any new user requesting MMCS access after the system is **live**.

MMCS DELAYED

The initial “Go-Live” date was scheduled by CMS for June 2004. This date has been changed, to the anticipated date of October 2004. **Stay tuned!**

NDM VS CONNECT: DIRECT

The Drug Card Sponsor initiative for connectivity to the EEVS system has created an avalanche of calls from our MCO users.

If you are a Drug Card Sponsor you will need to fill-out the form on the EEVS website to request the Connect:Direct access and a corresponding ID. The address for the EEVS website is: <http://www.cms.hhs.gov/discountdrugs> or send questions to EEVS_Sponsors@cms.hhs.gov.

If you are sending enrollment/disenrollment dates to the GHP system and currently have NDM access, some code modification and testing may be required by CMS to change you over to CONNECT:DIRECT.

CONNECT:DIRECT cannot be used to access MCCOY or HPMS.

ALERT – ALERT-ALERT

The annual Medicare Managed Care Enrollment and Payment Conference will be held September 7th through September 10th, 2004 at the Hyatt Inner Harbor Hotel in downtown Baltimore, Maryland. This conference is open to all active or pending Managed Care Organizations.

Registration information, registration forms, and the conference agenda will be available the week of July 1st, 2004 at: www.cms.hhs.gov/healthplans/systems. Should you have any questions please contact James Dorsey, CMS, at (410) 786-1143, or you may e-mail him at jdorsey1@cms.hhs.gov.

REMINDER – REVISED WORKING AGED PROCESS

This is the second year of the revised Working Aged process, as outlined the October 30, 2003 Plan Letter from the Health Plan Benefits Group (HPBG). Plans are reminded that this year’s survey will be based on the members enrolled and shown on the March, 2004 Monthly Membership report. The results of the survey must be submitted by September 15, 2004. The submission format remains unchanged. A copy of the Plan Letter may be viewed at:

<http://www.cms.hhs.gov/healthplans/systems/workingaged.asp>

MEDICARE MANAGED CARE SYSTEM (MMCS) USER TRAINING:

A **Basic Training** Session on Managed Care Enrollment and Payment Processes was held on April 19th, 2004, at the Centers for Medicare & Services (CMS) national headquarters in Baltimore, Maryland. This one-day training session, which was limited to the first 50 registrants, was hands-on, and targeted new or inexperienced Managed Care Organization (MCO) staff. The training focused on accessing the CMS computer systems, beneficiary enrollment, payment, and reconciliation processes.

In addition, there were several half-day training sessions on the **Medicare Managed Care System (MMCS)** for the plans during week April 20th through April 23rd, 2004, which also was held at CMS's headquarters.

These sessions were in addition to the MCO tutorial, located on the CMS Web page: cms.hhs.gov/healthplans/systems. The sessions were open only to active or pending MCOs, and focused on accessing MMCS, transmitting batch files, and using the online functionality for transaction edits.